

RECEIVED

June 12, 2018

JUN 16 2018

CHAMBERS OF
JUDGE LEE YEAKEL

Thomas Leon Marino
P.O Box 2509
Austin, Texas 78701

To: Judge Lee Yeakei
501 W. 5th Street
Suite 7300
Austin, Texas 78701

I am formally writing my Judge Lee Yeakei a Federal United States Federal Judge in The western district of the United States in Austin Texas. I have formally informed the following agencies Integral Care, and CSA Management of numerous acts of discrimination, non-equality, and actions against me that do not comply with State and Federal policies.

I had them put in writing the false accusations date and sign them in approximately June 27th, 2017. I followed up with my appointed Case worker Samantha Benn (Integral Care # 512 804-3669) in whom I meet with weekly as part as my case management progress report which include employment, income, medical (physical and psychiatric) and housing. I informed her in writing of the actions, and malicious acts against me and had her sign them that they have been notified that I intend to take legal action in a Federal Civil Court Or (Legal Action). As I continued to meet with her and we discussed this matter, The they have responded in various ways and actions. From acknowledgment and Sympathy, willing to correct the wrongs (but never did), to telling their clients that if I sue them this will make them homeless (which has resulted in me being assaulted and at least three death threats), Integral Care has continually had me sign electronically my signature several times and is on going when I report to see My Doctor, case, workers, and ect. They always say it is just for insurance payments or updates, and so on. I never receive copies or any evidence of what was signed. So I state too the judge if they they to submit that I have signed off in any way to legal action and a law suit this is fraudulent information and documents.

The claimant has enclosed two written and signed documents from the agencies that stand accused and are guilty. I demand the judge read and review the documents that will verify my creditability. I further request the judge to E-mail me at thomasmarino1972@gmail.com or mail me at the above address (Which is the ARCH?) Austin's men's shelter. Where I have been residing since October 30, 2014. If the Judge is willing to waive the court fee the claimant stands ready. With infinite more evidence to present.

Dear Honorable Judge,

The United States Citizen of Austin, Texas demands his rights to a trial. I have exhausted all other efforts, I am awaiting your response the plaintiff is physically and mentally exhausted and injured. Please do not delay.

Ps: The Claimant is willing upon the judge's request to meet and answer any questions or submit any evidence of these charges. At the judge's request. I have also enclosed the official petition of law suit I intend to file, but I have delayed shortly waiting your response. Also some medical records that may or may not be of help to your Honor.

Thank You

Thomas Leon Marino

Thomas Leon Marino

June 5, 2018
Thomas Leon Marino
5515 woodrow av. 112
Austin, Texas 78756

I Thomas Leon Marino A resident of Austin, Texas. Hereby formally Submit and have paid the court cost Seeking the earliest possible court date. To be preceded by a United States Federal judge in the Western district.

I the plaintiff am seeking Three Million dollars in damages in a United States Civil Court Against Integral Care and CSA Management. On the following charges listed below.
Note: Integral Care provides dozen of services for the disabled, including medical and housing.
CSA Management manages Integral Cares properties. The plaintiff completely understands
The Judge will rule and make judgment on the portions of each agencies liability on the
Facts of the evidence submitted and testified during the trail.

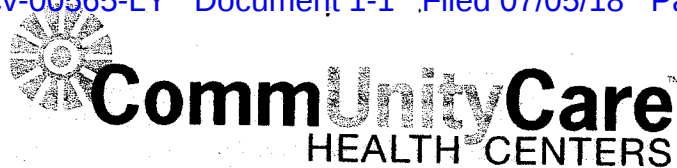
Unconstitutional acts upon me, including depriving me of services with no merit.
Blatant and on going malicious acts of discrimination, by not treating me with equality.
It is the plaintiff personal belief he has been maliciously discriminated on the bases of certain religious Entities.
Refusing to provide me with equality of services.
Continuous and on going Harassment and ridicule including laughing and mocking me for demanding my rights and must be treated with equality, and flat out stating they do not have too.
Wrongfully made homeless for over three years.
An numerous other malicious and unconstitutional actions I have been submitted to by these agencies, I Will present all evidence, which is their internal documents and other irrefutable evidence of these agencies violation of Texas Civil Rights Commission, and unconstitutional policies and procedures.

Integral Care
1430 Collier St.
Austin, Texas 78704

CSA Management
8305 Shoal Creek Blvd.
Austin, Texas 78757

512 447-4141

512 453-6566

**ARCH**

500 East 7th Street
Austin, TX 78701-3319
(512)978-9920

Plan Of Care And Clinical Summary

Thomas Marino

05/23/2017 08:20 AM

Visit Type: Office Visit

Thank you for choosing us for your healthcare needs. The following is a summary of the outcome of today's visit and other instructions and information we hope you find helpful.

Reason(s) For Visit

MD note.

Language assistance:
No-Checkout

Primary Care Provider: Escamilla MD, David

Today's Visit**Assessment/Plan**

#	Detail Type	Description
1.	Assessment	Prehypertension (R03.0).
	Impression	<ul style="list-style-type: none"> - Weight loss, low salt diet, regular exercise (ex. walking) to keep blood pressure from elevating - Return if blood pressure becomes elevated again - Return in November for blood pressure recheck - Continue care with Dr. Bach (psychiatry) - Remain drug free - Complete stool cards to screen for colon cancer - Flu vaccine recommended when available
2.	Assessment	Screen for colon cancer (Z12.11).
	Plan Orders	The patient is to have FOBT, Hemoccult ICT, Screen (w/o Sx) performed.
3.	Assessment	Substance abuse in remission (F19.10).
4.	Assessment	History of hypertension (Z86.79).

Patient Information	Specimen Information	Client Information
MARINO, THOMAS L DOB: 05/17/1963 AGE: 54 Gender: M Patient ID: 85860	Specimen: DL406615R Collected: 08/16/2017 / 11:53 CDT Received: 08/18/2017 / 04:47 CDT Faxed: 08/23/2017 / 09:05 CDT	Client #: 61193 ESCAMILLA, DAVID

medMATCH™ Drug Monitoring Report

Test Ordered	Result	Cutoff	medMATCH™	Lab
PAIN MANAGEMENT PROFILE 1 W/ CONFIRMATION, URINE			Endnote 1	IG
Amphetamines	Negative	500 ng/mL		
Barbiturates	Negative	200 ng/mL		
Benzodiazepines	Negative	100 ng/mL		
Marijuana Metabolite	Negative	20 ng/mL		
Cocaine Metabolite	Negative	150 ng/mL		
Methadone Metabolite	Negative	100 ng/mL		
Opiates	Negative	100 ng/mL		
Oxycodone	Negative	100 ng/mL		
Phencyclidine	Negative	25 ng/mL		

Specimen Validity Testing	Test Ordered	Result	Reference Range
	Creatinine	118.1	> or = 20.0 mg/dL
	pH	6.3	4.5-9.0
	Oxidant	Negative	<200 mcg/mL

Test Ordered	Result	Cutoff	medMATCH™	Lab
PAIN MGMT, FENTANYL, QN,W/medMATCH,U			Endnote 1	AP
Fentanyl	Negative	0.5 ng/mL		
Norfentanyl	Negative	0.5 ng/mL		
PAIN MGMT, MEPERIDINE, QN,W/medMATCH,U			Endnote 1	AP
Meperidine	Negative	100 ng/mL		
Normeperidine	Negative	100 ng/mL		

Endnote 1

This drug testing is for medical treatment only. Analysis was performed as non-forensic testing and these results should be used only by healthcare providers to render diagnosis or treatment, or to monitor progress of medical conditions.

medMATCH comments are:

- present when drug test results may be the result of metabolism of one or more drugs or when results are inconsistent with prescribed medication(s) listed.
- may be blank when drug results are consistent with prescribed medication(s) listed.

For assistance with interpreting these drug results, please contact a Quest Diagnostics Toxicology

Thomas Leon Marino	000006004378	(512) 573-7599	05/17/1963	M	Hunt, Matthew
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- may be blank when drug results are consistent with prescribed medication(s) listed.

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PAIN MGMT, TRAMADOL, QN,W/medMATCH,U

Desmethytramadol	NEGATIVE	ng/mL	<100
medMATCH Desmethytram	CONSISTENT		
Tramadol	NEGATIVE	ng/mL	<100
medMATCH Tramadol	CONSISTENT		

COMMENT SEE COMMENT

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- may be blank when drug results are consistent with prescribed medication(s) listed.

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PH, URINE, ATLAS

PH 6.0 (N) 5.0-8.0

The preferred specimen for urinalysis is urine preserved using a Stockwell Brand Urine Preservative Tube (yellow top, blue band) that may be obtained from your Quest Diagnostics supplier. Please review results with caution. Urinalysis testing on unpreserved urine may produce alteration of chemical constituents and deterioration of formed elements.

2018

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PATIENT NAME	PATIENT MR #	HOME PHONE	DOB	SEX	REQ. PROVIDER
Thomas Leon Marino	000006004378	(512) 573-7599	05/17/1963	M	Hunt, Matthew

This drug testing is for medical treatment only. Analysis was performed as non-forensic testing and these results should be used only by healthcare providers to render diagnosis or treatment, or to monitor progress of medical conditions.

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- present when drug test results may be the result of metabolism of one or more drugs or when results are inconsistent with prescribed medication(s) listed.
- may be blank when drug results are consistent with prescribed medication(s) listed.

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PAIN MGMT, FENTANYL, QN,W/medMATCH,U

Fentanyl	NEGATIVE	ng/mL	<0.5
medMATCH Fentanyl	CONSISTENT		
Norfentanyl	NEGATIVE	ng/mL	<0.5
medMATCH Norfentanyl	CONSISTENT		
COMMENT	SEE COMMENT		

This drug testing is for medical treatment only. Analysis was performed as non-forensic testing and these results should be used only by healthcare providers to render diagnosis or treatment, or to monitor progress of medical conditions.

medMATCH comments are:

- present when drug test results may be the result of metabolism of one or more drugs or when results are inconsistent with prescribed medication(s) listed.
- may be blank when drug results are consistent with prescribed medication(s) listed.

For assistance with interpreting these drug results, please contact a Quest Diagnostics Toxicology Specialist: 1-877-40-RX TOX (1-877-407-9869), M-F, 8am-6pm EST.

PAIN MGMT, MEPERIDINE, QN,W/medMATCH,U

Meperidine	NEGATIVE	ng/mL	<100
medMATCH Meperidine	CONSISTENT		
Normeperidine	NEGATIVE	ng/mL	<100
medMATCH Normeperidine	CONSISTENT		
COMMENT	SEE COMMENT		

2018
PATIENT NAME

PATIENT MR #

HOME PHONE

DOB

SEX

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REQ. PROVIDER

Thomas Leon Marino

000006004378

(512) 573-7599

05/17/1963

M

Hunt, Matthew

Order Number: NGP3677584

Collection Date: 1/12/2018

Received Date: 1/13/2018

CREATININE, RANDOM URINE

CREATININE, RANDOM UR	166 (N)	mg/dL	20-370
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PAIN MANAGEMENT PROFILE * CONFIRMATION, URINE**

Creatinine	161.2 (N)	mg/dL	> or = 20.0
pH	5.8 (N)		4.5-9.0
Oxidant	NEGATIVE (N)	mcg/mL	<200
Amphetamines	NEGATIVE CONFIRMED (N)	ng/mL	<500
Amphetamine	NEGATIVE (N)	ng/mL	<250
medMATCH Amphetamine	CONSISTENT (N)		
Methamphetamine	NEGATIVE (N)	ng/mL	<250
medMATCH Methamphetamine	CONSISTENT		
Barbiturates	NEGATIVE (N)	ng/mL	<300
medMATCH Barbiturates	CONSISTENT (N)		
Benzodiazepines	NEGATIVE (N)	ng/mL	<100
medMATCH Benzodiazepine	CONSISTENT (N)		
Marijuana Metabolite	NEGATIVE (N)	ng/mL	<20
medMATCH Marijuana Metabolite	CONSISTENT (N)		
Cocaine Metabolite	NEGATIVE (N)	ng/mL	<150
medMATCH Cocaine Metabolite	CONSISTENT (N)		
Methadone Metabolite	NEGATIVE (N)	ng/mL	<100
medMATCH Methadone Metabolite	CONSISTENT (N)		
Opiates	NEGATIVE (N)	ng/mL	<100
medMATCH Opiates	CONSISTENT (N)		
Oxycodone	NEGATIVE (N)	ng/mL	<100
medMATCH Oxycodone	CONSISTENT (N)		
Phencyclidine	NEGATIVE (N)	ng/mL	<25
medMATCH Phencyclidine	CONSISTENT (N)		
COMMENT	SEE COMMENT		

2018

PATIENT NAME	PATIENT MR #	HOME PHONE	DOB	SEX	REQ. PROVIDER
Thomas Leon Marino	000006004378	(512) 573-7599	05/17/1963	M	Hunt, Matthew

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Order Number: NGP3677583

Collection Date: 1/12/2018

Received Date: 1/13/2018

CHLAMYDIA, GONORRHOEA RNA, TMA

CHLAMYDIA TRACHOMATIS NOT DETECTED (N)

NOT DETECTED

NEISSERIA GONORRHOEA NOT DETECTED (N)

NOT DETECTED

COMMENT SEE COMMENT

This test was performed using the APTIMA COMBO 2 Assay (Gen-Probe Inc.).

The analytical performance characteristics of this assay, when used to test SurePath specimens have been determined by Quest Diagnostics.

REFLEXIVE URINE CULTURE

REFLEXIVE URINE CULTURE NO CULTURE INDICATED

URINALYSIS, COMPLETE W/REFLEX TO CULTURE

COLOR	YELLOW (N)	YELLOW
APPEARANCE	CLEAR (N)	CLEAR
SPECIFIC GRAVITY	1.023 (N)	1.001-1.035
PH	6.0 (N)	5.0-8.0
GLUCOSE	NEGATIVE (N)	NEGATIVE
BILIRUBIN	NEGATIVE (N)	NEGATIVE
KETONES	NEGATIVE (N)	NEGATIVE
OCCULT BLOOD	NEGATIVE (N)	NEGATIVE
PROTEIN	NEGATIVE (N)	NEGATIVE
NITRITE	NEGATIVE (N)	NEGATIVE
LEUKOCYTE ESTERASE	NEGATIVE (N)	NEGATIVE
WBC	NONE SEEN (N)	/HPF < OR = 5
RBC	0-2 (N)	/HPF < OR = 2
SQUAMOUS EPITHELIAL C	NONE SEEN (N)	/HPF < OR = 5
BACTERIA	NONE SEEN (N)	/HPF NONE SEEN
HYALINE CAST	NONE SEEN (N)	/LPF NONE SEEN

PATIENT NAME

PATIENT MR #

HOME PHONE

DOB

SEX

REQ. PROVIDER

Thomas Leon Marino

000006004378

(512) 573-7599

05/17/1963

M

Hunt, Matthew

HIV-1 antigen and HIV-1/HIV-2 antibodies were not detected. There is no laboratory evidence of HIV infection.

PLEASE NOTE: This information has been disclosed to you from records whose confidentiality may be protected by state law. If your state requires such protection, then the state law prohibits you from making any further disclosure of the information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law. A general authorization for the release of medical or other information is NOT sufficient for this purpose.

For additional information please refer to <http://education.questdiagnostics.com/faq/FAQ106> (This link is being provided for informational/educational purposes only.)

The performance of this assay has not been clinically validated in patients less than 2 years old.

LIPID PANEL

TRIGLYCERIDES	90 (N)	mg/dL	<150
NON HDL CHOLESTEROL	133 (H)	mg/dL (ca	<130

For patients with diabetes plus 1 major ASCVD risk factor, treating to a non-HDL-C goal of <100 mg/dL (LDL-C of <70 mg/dL) is considered a therapeutic option.

CHOLESTEROL, TOTAL	197 (N)	mg/dL	<200
HDL CHOLESTEROL	64 (N)	mg/dL	>40
LDL-CHOLESTEROL	114 (H)	mg/dL (ca	

Reference range: <100

Desirable range <100 mg/dL for patients with CHD or diabetes and <70 mg/dL for diabetic patients with known heart disease.

LDL-C is now calculated using the Martin-Hopkins calculation, which is a validated novel method providing better accuracy than the Friedewald equation in the estimation of LDL-C.

Martin SS et al. JAMA. 2013;310(19): 2061-2068 (<http://education.QuestDiagnostics.com/faq/FAQ164>)

CHOL/HDL C RATIO	3.1 (N)	(calc)	<5.0
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RPR (DX) W/REFL TITER AND CONFIRMATORY TESTING

RPR (DX) W/REFL TITER AI	NON-REACTIVE (N)	NON-REACTIVE
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TSH

PATIENT NAME	PATIENT MR #	HOME PHONE	DOB	SEX	REQ. PROVIDER
Thomas Leon Marino	000006004378	(512) 573-7599	05/17/1963	M	Hunt, Matthew

eGFR NON-AFR. AMERICAN	96 (N)	mL/min/1.73 m ²	> OR = 60
eGFR AFRICAN AMERICAN	112 (N)	mL/min/1.73 m ²	> OR = 60
BUN/CREATININE RATIO	NOT APPLICABLE	(calc)	6-22
SODIUM	142 (N)	mmol/L	135-145
POTASSIUM	4.3 (N)	mmol/L	3.5-5.3
CHLORIDE	106 (N)	mmol/L	98-110
CARBON DIOXIDE	26 (N)	mmol/L	20-31
CALCIUM	9.4 (N)	mg/dL	8.6-10.3
PROTEIN, TOTAL	6.8 (N)	g/dL	6.1-8.1
ALBUMIN	4.5 (N)	g/dL	3.6-5.1
GLOBULIN	2.3 (N)	g/dL (calc)	1.9-3.7
ALBUMIN/GLOBULIN RATIO	2.0 (N)	(calc)	1.0-2.5
BILIRUBIN, TOTAL	0.8 (N)	mg/dL	0.2-1.2
ALKALINE PHOSPHATASE	76 (N)	U/L	40-115
AST	13 (N)	U/L	10-35
ALT	14 (N)	U/L	9-46

HEPATITIS B SURFACE ANTIGEN W/REFL CONFIRM

HEPATITIS B SURFACE ANTIGEN	NON-REACTIVE (N)	NON-REACTIVE
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HEPATITIS C AB W/REFL TO HCV RNA, QN, PCR

HEPATITIS C ANTIBODY	NON-REACTIVE (N)	NON-REACTIVE
SIGNAL TO CUT-OFF	0.01 (N)	<1.00

HIV 1/2 ANTIGEN/ANTIBODY, FOURTH GENERATION W/REFL

HIV AG/AB, 4TH GEN	NON-REACTIVE (N)	NON-REACTIVE
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PATIENT NAME

PATIENT MR #

HOME PHONE

DOB

SEX

REQ. PROVIDER

Thomas Leon Marino

000006004378

(512) 573-7599

05/17/1963

M

Hunt, Matthew

Order Number: NGP3677582

Collection Date: 1/12/2018

Received Date: 1/13/2018

CBC (INCLUDES DIFF/PLT)

WHITE BLOOD CELL COUN	8.6 (N)	Thousand	3.8-10.8
RED BLOOD CELL COUNT	5.45 (N)	Million/uL	4.20-5.80
HEMOGLOBIN	16.2 (N)	g/dl	13.2-17.1
HEMATOCRIT	47.8 (N)	%	38.5-50.0
MCV	87.7 (N)	fL	80.0-100.0
MCH	29.7 (N)	pg	27.0-33.0
MCHC	33.9 (N)	g/dL	32.0-36.0
RDW	12.9 (N)	%	11.0-15.0
PLATELET COUNT	262 (N)	Thousand	140-400
MPV	10.2 (N)	fL	7.5-12.5
ABSOLUTE NEUTROPHILS	5710 (N)	cells/uL	1500-7800
ABSOLUTE LYMPHOCYTES	1772 (N)	cells/uL	850-3900
ABSOLUTE MONOCYTES	516 (N)	cells/uL	200-950
ABSOLUTE EOSINOPHILS	516 (H)	cells/uL	15-500
ABSOLUTE BASOPHILS	86 (N)	cells/uL	0-200
NEUTROPHILS	66.4 (N)	%	
LYMPHOCYTES	20.6 (N)	%	
MONOCYTES	6.0 (N)	%	
EOSINOPHILS	6.0 (N)	%	
BASOPHILS	1.0 (N)	%	

COMPREHENSIVE METABOLIC PANEL

GLUCOSE	87 (N)	mg/dL	65-99
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Fasting reference interval

UREA NITROGEN (BUN)	12 (N)	mg/dL	7-25
CREATININE	0.90 (N)	mg/dL	0.70-1.33

For patients >49 years of age, the reference limit for Creatinine is approximately 13% higher for people identified as African-American.

Austin, Texas 7875

LA Poloma

I Thomas MARINO have witnessed constant violations at La Poloma for years. I know of seven Apartments of 18 that have unauthorized tenants. Property Management and ATCIC are aware of this and condone it. Property Management, maintenance, and ATCIC case workers are aware of this. I have and my case worker Morgan Myer have acknowledged this. I have numerous times reported this to ATCIC workers. I have always complied with ATCIC and CSAM management. Up to even leaving the premises I occupied with a walk thru and turning in my keys, with approval of Property Management. These offenders do not and they cater to them. I am formally given notice, that I charging them of not treating me with equality. Further more that I have been misled by them, deprived of proper housing services. Discriminated against and treated maliciously. Some of these unauthorized tenants have been there for five years

received this on 6/23/17

Samantha Beem, CMGN

R

Thomas Marino

06/16/2017

'Integral Care'

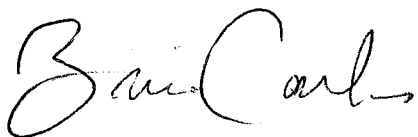
5225 N. Lamar

Austin, TX 78751

To Thomas Marino:

Mr. Marino has been frequenting 'True North' groups as part of his recovery services at 'Integral Care'. Due to recent reports from staff indicating belief that Mr. Marino is under the influence of substance use on campus, coupled with behaviors noticed by the group facilitators, we are asking Mr. Marino to suspend group attendance until further instruction from supervisors. Mr. Marino has stated that he is not under the influence of substance use and that he has been attempting to get a drug test completed by our agency for several months, to no avail.

Signed,

A handwritten signature in black ink, appearing to read "Brian Carlson". The signature is fluid and cursive, with the first name "Brian" and last name "Carlson" clearly distinguishable.

Brian Carlson

QMHP – Group Facilitator

'Integral Care'